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PTO/SB/21 (08-00)

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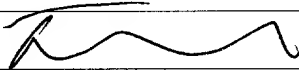
<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/845,138
	<b>Filing Date</b>	04/30/2001
	<b>First Named Inventor</b>	OTERO
	<b>Group Art Unit</b>	2825
	<b>Examiner Name</b>	
<b>Total Number of Pages in this Submission</b>	<b>Attorney Docket Number</b>	21710-68171

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers/Recordation Cover Sheet (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s): Substitute Drawings Under 37 CFR 1.84	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney/Revocation/Change of Correspondence Address	<input checked="" type="checkbox"/> <b>Other Enclosure(s) (please identify below):</b>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	(1) Request for Corrected Filing Receipt
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	(2) Supplemental Information Data Sheet
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	RETURN RECEIPT POSTCARD
<input checked="" type="checkbox"/> Response to Notice re Missing Parts / Corrected Application Papers / Incomplete Application	<b>Remarks</b>	
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

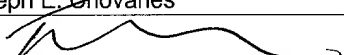
**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

**CUSTOMER NO. 27730**

Firm or Individual name	Joseph E. Chovanes (Registration No. 33,481)
Signature	
Date	October 18, 2001

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents, Washington, DC 20231 on this date: October 18, 2001.

Typed or printed name	Joseph E. Chovanes		
Signature		Date	October 18, 2001

**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT (\$)** 130**METHOD OF PAYMENT**1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:Deposit Account **50-0979**

Deposit Account Name

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status See 37 CFR 1.272. ☒ **Payment Enclosed**☒ Check ☐ Credit Card ☐ Money Order ☐ Other**FEE CALCULATION****I. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
101	740	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee
<b>SUBTOTAL (1)</b>				<b>\$</b>

**2. EXTRA CLAIMS FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	— - 20** =	X 18 =	\$
Independent Claims	— - 3** =	X 84 =	\$
Multiple Independent		+ 280 =	\$

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)**

\$

\*\*or number previously paid, if greater; For Reissue, see above

**SUBMITTED BY CUSTOMER NO. 27730****Complete if known**

Application Number **09/845,138**  
 Filing Date **04/30/2001**  
 First Named Inventor **OTERO et al.**  
 Examiner Name  
 Group Art Unit **2825**  
 Attorney Docket No. **21710-69743**

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

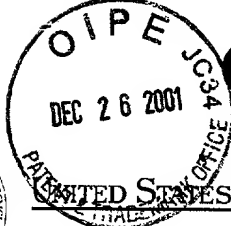
Fee Code	Large Entity Fee (\$)	Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	\$130
139	130	139	130	Non-English specification	
147	2520	147	2520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1840*	113	1840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1440	218	720	Extension for reply within fourth month	
128	1960	228	980	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1510	138	1510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1280	241	640	Petition to revive - unintentional	
142	1280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petition to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	375	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** \$

Complete (if applicable)

Name (Print/Type) **Joseph E. Chovanes** Registration No. (Attorney/Agent) **33,481** Telephone **(215) 575-7000**  
 Signature *[Signature]* Date **October 18, 2001**



UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/845,138	04/30/2001	Hernan G. Otero	21710-68171

CONFIRMATION NO. 3105

27730  
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1735 MARKET STREET  
PHILADELPHIA, PA 19103

## FORMALITIES LETTER



\*OC000000006496811\*

Date Mailed: 08/30/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
  - drawings have a line quality that is too light to be reproduced (weight of all lines and letters must be heavy enough to permit adequate reproduction) or text that is illegible (reference characters, sheet numbers, and view numbers must be plain and legible) see 37 CFR 1.84(l) and (p)(1));

12/28/2001 NMOHAMM1 00000013 09845138

01 FC:105

130.00 OP

*A copy of this notice **MUST** be returned with the reply.*

AST  
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

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